Prison Rape Elimination Act (PREA) Audit Report

Adult Prisons & Jails				
	☐ Interim	⊠ Final		
Date of Report July 15, 2018				
Auditor Information				
Name: John Barkley		Email: fiddlinwarden@y	ahoo.com	
Company Name: PREA A	uditors of America	L		
Mailing Address: 14506 Lakeside View Way City, State, Zip: Cypress, Texas			Texas	
Telephone: 803 451 1382	2	Date of Facility Visit: Febru	uary 26-28, 2018	
Agency Information				
Name of Agency:		Governing Authority or Parent	Agency (If Applicable):	
King County Dept. of Adult and Juvenile Detention		King County		
Physical Address: 500 5th Avenue		City, State, Zip: Seattle, V	VA 98104	
Mailing Address: 500 5th Avenue City, State, Zip: Seattle, WA 98104				
Telephone: 206 296 1234 Is Agency accredited by any organization? ☐ Yes ☒ No		rganization?		
The Agency Is:	☐ Military	☐ Private for Profit	☐ Private not for Profit	
☐ Municipal	□ County	☐ State	☐ Federal	
Agency mission: The Department of Adult and Juvenile Detention contributes to the public safety of the citizens of King County and Washington Stat in operating safe, secure and humane detention facilities and community corrections programs, in an innovative and cost-effective manner. Agency Website with PREA Information: https://kingcounty.gov/depts/jails/prison-rape-elimination-act.aspx				
	Agency Chief E	xecutive Officer		
Name: William Hayes		Title: Department Direct		
Email: William.hayes@l	kingcounty.gov	Telephone: 206 477 280	1	
Agency-Wide PREA Coordinator				

Email: Melinda.thae@kingcounty.gov PREA Coordinator Reports to: Steve Larsen Facility Information Name of Facility: Maleng Regional Justice Center (MRJC) Physical Address: 620 West James Street, Kent, WA 98032 Mailing Address (if different than above): Same Telephone Number: 206 296 1234 The Facility Is: Military Private for profit Private not for private not for profit Private not for profit Private not for profit Private not for private not f	Name: Melinda Thao		Title: Project/Program Mgr IV		
Steve Larsen Coordinator reports 2 Majors but they are not direct reports	Email: Melinda.thae@king	gcounty.gov	Telephone: 206 477 2356		
Facility Information	-				
Name of Facility: Maleng Regional Justice Center (MRJC) Physical Address: 620 West James Street, Kent, WA 98032 Mailing Address (if different than above): same Telephone Number: 206 296 1234 The Facility Is: Military Private for profit Private not for profit Private not for pr	Steve Larsen		reports		
Physical Address: 620 West James Street, Kent, WA 98032 Mailing Address (if different than above): Same		Facili	ity Information		
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Telephone Number: 206 296 1234 The Facility Is:	Physical Address: 620 We	st James Street, K	Kent, WA 98032		
The Facility Is: Municipal County State Private for profit Private not for profit Private not for profit Municipal County State Prison Facility Type: Jail Prison Facility Mission: The Department of Adult and Juvenile Detention contributes to the public safety of the citizens of King County and Washington State in operating safe, secure and humane detention facilities and community corrections programs, in an innovative and cost-effective manner. Facility Website with PREA Information: https://kingcounty.gov/depts/jails/prison-rape-elimination-act.aspx Warden/Superintendent Name: Corinna Hyatt Title: Facility Commander Email: corinna.hyatt@kingcounty.gov Telephone: 206 477 5061 Facility PREA Compliance Manager Name: Edwin Bautista Title: Facility Major Telephone: 206 477 2804 Facility Health Service Administrator Name: Bette Pine Title: Jail Health Services Manager Facility Characteristics	Mailing Address (if different than	above): Same			
Municipal County State Federal Federal Facility Type: Jail Prison Prison	•	96 1234			
Facility Type: Sail Prison	The Facility Is:	☐ Military	☐ Private for profit ☐ Private not for profit		
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Name: Corinna Hyatt Title: Facility Commander Email: corinna.hyatt@kingcounty.gov Telephone: 206 477 5061 Facility PREA Compliance Manager Name: Edwin Bautista Title: Facility Major Email: edwin.bautista@kingcounty.gov Telephone: 206 477 2804 Facility Health Service Administrator Name: Bette Pine Title: Jail Health Services Manager Email: bette.pine@kingcounty.gov Telephone: 206 263 8284 Facility Characteristics	the citizens of King County and Washington State in operating safe, secure and humane detention				
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Facility Characteristics	Name: Bette Pine		Title: Jail Health Services Manager		
	Email: bette.pine@kingco	unty.gov	Telephone: 206 263 8284		
Designated Facility Capacity: 1697 Current Population of Facility: 785	Facility Characteristics				
lack lack lack	Designated Facility Capacity: 1697 Current Population of Facility: 785				

Number of inmates admitted to facility during the past 12 months			6640		
facility was for 30			_		1682
was for 72 hours of				he facility	5416
Number of inmate	s on date of audit who were admitted to	o facility prior to A	ugust 20, 2012:		2
Age Range of Population:	Youthful Inmates Under 18: NO inm		Adults: 1	8-91	
Are youthful inma	tes housed separately from the adult p	opulation?	☐ Yes	☐ No	⊠ NA
Number of youthfu	ul inmates housed at this facility during	g the past 12 month	ns:		10
Average length of	stay or time under supervision:				175 days
Facility security le	vel/inmate custody levels:				Minimum to maximum
Number of staff cu	urrently employed by the facility who m	nay have contact w	ith inmates:		231
Number of staff hi	red by the facility during the past 12 m	onths who may ha	ve contact with	inmates:	86
Number of contraction inmates:	cts in the past 12 months for services v	with contractors wh	no may have co	ntact with	0
Physical Plant					
Number of Buildin	•	Number of Single	Cell Housing U	Inits: 4	
Number of Multiple Occupancy Cell Housing Units: 11					
Number of Open Bay/Dorm Housing Units: 12					
Number of Segregation Cells (Administrative and Disciplinary: 32					
Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.):					
Cameras have been strategically placed to enhance security of the jail. The cameras are monitored by a central control area. This is strategically placed at the crossroads of the hallway. Officers at that post can monitor cameras and also has a visual of the hallway activity.					
Medical					
Type of Medical Fa	acility:	Clinic			
Forensic sexual as	ssault medical exams are conducted at	:: Harborv	iew Medical	Center	
Other					
	Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:			113	
Number of investigators the agency currently employs to investigate allegations of sexual abuse:			five		

Audit Findings

Audit Narrative

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-onsite audit, onsite audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

On February 28, 2018 the audit began of the Maleng Regional Justice Center (MRJC) located in Kent. Washington. The inmate count for the first day was 785 inmates Prior to the auditor's arrival on site the PREA questionnaire was completed by MRJC and submitted to the auditor for review. Included in the questionnaire were documents and policies for the audit to review. Seven weeks prior to the arrival of the auditor an announcement of the audit was posted for staff and inmates to see. This posting included a mailing address for the auditor. This is the second audit of the facility and the auditor was also able to review the audit performed 3 years ago by a different DOJ certified auditor. While on site the auditor took a tour of the entire facility going into each housing area, program area, medical, and kitchen and booking area. The auditor had unlimited access to all areas. The auditor spent 3 days on site of MRJC spending the hours dictated in the PREA auditor's handbook for a jail this size. The auditor performed random interviews with correctional officers who have contact with the inmates and interviews with specialized staff. Random inmates were chosen by the auditor ensuring that a sampling of all living areas, race and sex housed at the detention center were interviewed. Inmates that fell into the specialized categories were also interviewed. Investigation files were reviewed and investigators were interviewed to discuss cases that had occurred since the last PREA Audit. All interviews for staff and inmates were held in locations that provided confidentiality and the opportunity for the inmate or staff to speak freely about the prison and to allow the interviewee to focus on what was being asked. All staff and inmates were cooperative.

Facility Characteristics

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate, resident or detainee population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

The Maleng Regional Justice Center is one single floor structure with 2 large hallways intersecting in the middle with a large control room. Off of each hallway are entrances into the living units. The jail consists of 14 units and they are labeled beginning with the letter "D" and ending with the letter "S". Each unit houses a maximum of 64 inmates. Most of the cells are single person cells but 6 of the units are two men to a cell. Units N and M have 32 inmates on each side. M unit East and West are for new bookings and the N East is RHU. There is no "O" unit and the "P" unit is where the females are housed. The shower and toilet areas that are in a common area have sufficient covering to allow the detainee to use them without being seen by a member of the opposite sex. There are 196 FTE's at the jail and 35 FTE's who are employed by the

county Jail Health. The officers work three 8 hour shifts. Volunteer overtime, and if needed, mandatory overtime is used to ensure all posts are covered. This is relevant to PREA because it shows the importance placed on security staff to run a detention center in order to keep a watchful eye on the inmates. Cameras are used throughout the facility to monitor areas and watch over blind spots. These cameras are monitored by the main control room and are saved digitally once they are recorded.

Summary of Audit Findings

Number of Standards Exceeded:

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance.

Auditor Note: No standard should be found to be "Not Applicable" or "NA". A compliance determination must be made for each standard.

none

There are no standards that exceeded			
Number of Standards Met:	45 (forty-five)		
Click or tap here to enter text.			
Number of Standards Not Met: none			
Summary of Corrective Action (if any)			
PREVENTION PLANNING			

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

115.11 (a)

■ Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?

□ No

•		ne written policy outline the agency's approach to preventing, detecting, and responding all abuse and sexual harassment? $\ oxdot \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		
115.11	(b)			
	` ,			
•	Has the	e agency employed or designated an agency-wide PREA Coordinator? Yes No		
•	Is the F	PREA Coordinator position in the upper-level of the agency hierarchy? $\ oxtimes$ Yes $\ oxtimes$ No		
•	overse	ne PREA Coordinator have sufficient time and authority to develop, implement, and e agency efforts to comply with the PREA standards in all of its facilities? $\hfill \square$ No		
115.11	(c)			
•		igency operates more than one facility, has each facility designated a PREA compliance er? (N/A if agency operates only one facility.) \boxtimes Yes \square No \square NA		
•	 Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.) ☑ Yes □ No □ NA 			
Audito	r Overa	all Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)		
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (Requires Corrective Action)		

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The policy is very clear that there is a zero tolerance to sexual abuse and harassment. The interim PREA coordinator prior to the audit had done her due diligence to prepare documentation and be very familiar with the standards and what was expected. She worked closely with the Majors of the two jails who are the designated compliance managers. This is an excellent use of the PCM position because they fall immediately under the Facility Commander. This shows the inmates and the staff the importance and seriousness of the zero tolerance. Also the newly hired PREA Coordinator was on site

for the audit to be a part of the audit process as she prepares to take over and manage through the corrective action period. There is an obvious commitment from King County to protect those in their custody from being sexually abused or harassed.

Standard 115.12: Contracting with other entities for the confinement of inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.1	12 (a)
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•	If this agency is public and it contracts for the confinement of its inmates with private agencies
	or other entities including other government agencies, has the agency included the entity's
	obligation to comply with the PREA standards in any new contract or contract renewal signed or
	or after August 20, 2012? (N/A if the agency does not contract with private agencies or other
	entities for the confinement of inmates.) ☐ Yes ☐ No ☒ NA

115.12 (b)

Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".) □ Yes □ No ⋈ NA

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

King County does not use any other detention facility to house their inmates.

Standard 115.13: Supervision and monitoring

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.13 (a)	1	1	5.	.1	3	((a)
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•	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? \boxtimes Yes \square No
•	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No \square NA

• Does the agency ensure that each facility's staffing plan takes into consideration any applicable

	State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
115.13	3 (b)
•	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.) \square Yes \square No \boxtimes NA
115.13	3 (c)
•	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section? \boxtimes Yes \square No
•	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies? \boxtimes Yes \square No
•	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? \boxtimes Yes \square No
115.13	3 (d)
•	Has the facility/agency implemented a policy and practice of having intermediate-level or higher level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? \boxtimes Yes \square No
•	Is this policy and practice implemented for night shifts as well as day shifts? $oximes$ Yes \oximin No
•	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? \boxtimes Yes \square No
Audito	or Overall Compliance Determination
	☐ Exceeds Standard (Substantially exceeds requirement of standards)

		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instruc	ctions f	or Overall Compliance Determination Narrative
complia conclus not me	ance or i sions. Th et the st	below must include a comprehensive discussion of all the evidence relied upon in making the mon-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does andard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
correct unanno listing of	ive action of example of example of the contract of the contra	n place that prohibits staff from alerting other staff about supervisory rounds. During the con period DAJD has taken additional steps to reinforce the practice of the policy for rounds. Included in the yearly refresher training that was provided to the auditor are a ples of risky behavior and the importance of rounds. Questions with the test for the sinforce the information that staff are expected to know.
Stand	dard 1	15.14: Youthful inmates
All Yes	s/No Qu	estions Must Be Answered by the Auditor to Complete the Report
115.14	(a)	
•	sound,	he facility place all youthful inmates in housing units that separate them from sight, and physical contact with any adult inmates through use of a shared dayroom or other on space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates <18 years old].) \square Yes \square No \boxtimes NA
115.14	(b)	
•	youthfu	s outside of housing units does the agency maintain sight and sound separation between all inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 old].) \square Yes \square No \boxtimes NA
•	inmate	s outside of housing units does the agency provide direct staff supervision when youthful s and adult inmates have sight, sound, or physical contact? (N/A if facility does not have I inmates [inmates <18 years old].) \square Yes \square No \boxtimes NA
115.14	(c)	
•	with thi	ne agency make its best efforts to avoid placing youthful inmates in isolation to comply s provision? (N/A if facility does not have youthful inmates [inmates <18 years old].) □ No □ NA

•	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].) \square Yes \square No \boxtimes NA		
•	possib	outhful inmates have access to other programs and work opportunities to the extent le? (N/A if facility does not have youthful inmates [inmates <18 years old].) □ No □ NA	
Audito	r Over	all Compliance Determination	
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	
Instruc	ctions f	or Overall Compliance Determination Narrative	
complia conclus not me	ance or sions. T et the si	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.	
There	are no i	nmates under the age of 18 housed at the Maleng Regional Justice Center	
_			
Stand	dard 1	115.15: Limits to cross-gender viewing and searches	
All Yes	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report	
115.15	(a)		
•	body c	he facility always refrain from conducting any cross-gender strip or cross-gender visual avity searches, except in exigent circumstances or by medical practitioners? $\hfill \square$ No	
115.15	(b)		
•	inmate	he facility always refrain from conducting cross-gender pat-down searches of female s in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before 20,2017.) \boxtimes Yes \square No \square NA	

•	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20, 2017.) \boxtimes Yes \square No \square NA
115.15	(c)
•	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? \boxtimes Yes \square No
•	Does the facility document all cross-gender pat-down searches of female inmates? $\hfill \boxtimes$ Yes $\hfill \square$ No
115.15	(d)
•	Does the facility implement a policy and practice that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? \boxtimes Yes \square No
•	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? \boxtimes Yes \square No
115.15	(e)
•	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? \boxtimes Yes \square No
•	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? \boxtimes Yes \square No
115.15	5 (f)
•	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? \boxtimes Yes \square No
•	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? \boxtimes Yes \square No
Audito	or Overall Compliance Determination
	•
	Exceeds Standard (Substantially exceeds requirement of standards)

\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The staff at booking are the first staff to encounter the inmate and all interviewed were aware of the need to perform security but also be respectful of the person's sexual identity. The inmates interviewed confirmed this with questions asked of them and the auditor was able to witness bookings in progress to see how the staff interacted with newly arrested citizens. A great detail was taken for the person's safety and security and to treat them with dignity and respect. This is stressed through training of the staff and through direct supervision.

Standard 115.16: Inmates with disabilities and inmates who are limited English proficient

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.16 (a)

•	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing? \boxtimes Yes \square No
•	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision? \boxtimes Yes \square No
•	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities? \boxtimes Yes \square No

Does the agency take appropriate steps to ensure that inmates with disabilities have an equal
opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect,

	and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities? \boxtimes Yes \square No
•	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities? \boxtimes Yes \square No
•	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes)? \boxtimes Yes \square No
•	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? \boxtimes Yes \square No
•	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? \boxtimes Yes \square No
•	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? \boxtimes Yes \square No
•	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills? \boxtimes Yes \square No
•	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision? \boxtimes Yes \square No
115.16	6 (b)
•	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? \boxtimes Yes \square No
•	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? \boxtimes Yes \square No
115.16	6 (c)
_	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other
-	types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? Yes

Auditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	
nstru	ctions	for Overall Compliance Determination Narrative	
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angua specia classif nform	The detention facility offers all of the information in Spanish and has the ability to provide other anguages if needed. Inmates coming in through booking are immediately determined if they have special needs and these are addressed by the officer, by medical staff/mental health staff and by classification. At the very beginning of the process staff ensure that the detainee understands the information they are given. They do not use inmates to interpret. The staff are aware of the language ine and the auditor used the language line to interview an inmate who only spoke Spanish.		
Stan	dard '	115.17: Hiring and promotion decisions	
All Ye	s/No Q	uestions Must Be Answered by the Auditor to Complete the Report	
115.17	7 (a)		
•	who ha	the agency prohibit the hiring or promotion of anyone who may have contact with inmates as engaged in sexual abuse in a prison, jail, lockup, community confinement facility, e facility, or other institution (as defined in 42 U.S.C. 1997)? Yes No	
•	who ha	the agency prohibit the hiring or promotion of anyone who may have contact with inmates as been convicted of engaging or attempting to engage in sexual activity in the community ted by force, overt or implied threats of force, or coercion, or if the victim did not consent a unable to consent or refuse? \boxtimes Yes \square No	
•	who ha	the agency prohibit the hiring or promotion of anyone who may have contact with inmates as been civilly or administratively adjudicated to have engaged in the activity described in estion immediately above? \boxtimes Yes \square No	

•	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? ⊠ Yes □ No
•	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? \boxtimes Yes \square No
•	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? \boxtimes Yes \square No
115.17	(b)
•	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates? \boxtimes Yes \square No
115.17	" (c)
•	Before hiring new employees, who may have contact with inmates, does the agency: perform a criminal background records check? \boxtimes Yes \square No
•	Before hiring new employees, who may have contact with inmates, does the agency: consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? \boxtimes Yes \square No
115.17	' (d)
•	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? \boxtimes Yes \square No
115.17	' (e)
•	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees? \boxtimes Yes \square No
115.17	' (f)
•	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? \boxtimes Yes \square No

•	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? \boxtimes Yes \square No		
•	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? \boxtimes Yes $\ \square$ No		
115.17	' (g)		
•		he agency consider material omissions regarding such misconduct, or the provision of ally false information, grounds for termination? \boxtimes Yes \square No	
115.17	' (h)		
•	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.) \boxtimes Yes \square No \square NA		
Auditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	

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The background check and application of all new hires is very thorough. The information that is requested from the applicant allows King County to do a thorough vetting of the potential employee. The unions of the different areas within the detention center are supportive of terminating any individual who does not meet the high standards placed by the county. King County is very thorough to ensure that they hire the best qualified staff and staff who measure up to the high standards they have placed. Applications for employment were reviewed and interviews with HR and with the unit who performs background checks allowed the auditor to understand the process. Maleng Regional Justice Center understands the importance of hiring and promoting the correct individual.

Standard 115.18: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.18 (a)
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•	modific expans if ager facilitie	agency designed or acquired any new facility or planned any substantial expansion or cation of existing facilities, did the agency consider the effect of the design, acquisition, sion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A acy/facility has not acquired a new facility or made a substantial expansion to existing as since August 20, 2012, or since the last PREA audit, whichever is later.) \square No \square NA
115.18	3 (b)	
•	If the a other ragency update technology	agency installed or updated a video monitoring system, electronic surveillance system, or monitoring technology, did the agency consider how such technology may enhance the y's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or ed a video monitoring system, electronic surveillance system, or other monitoring elogy since August 20, 2012, or since the last PREA audit, whichever is later.)
Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions	for Overall Compliance Determination Narrative
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There	have be	een no new extensions or modifications made to the existing facility, MRJC

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.21	(a)
113.21	(a)
•	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) \boxtimes Yes \square No \square NA
115.21	(b)
•	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) \boxtimes Yes \square No \square NA
•	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) \boxtimes Yes \square No \square NA
115.21	(c)
•	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate? \boxtimes Yes \square No
•	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? \boxtimes Yes \square No
•	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? \boxtimes Yes \square No
•	Has the agency documented its efforts to provide SAFEs or SANEs? $oximes$ Yes \oximin No
115.21	(d)
•	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? \boxtimes Yes $\ \square$ No
•	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? \boxtimes Yes \square No

•		e agency documented its efforts to secure services from rape crisis centers? $\hfill\square$ No
115.21	(e)	
•	qualifie	uested by the victim, does the victim advocate, qualified agency staff member, or d community-based organization staff member accompany and support the victim the forensic medical examination process and investigatory interviews? Yes No
•	•	uested by the victim, does this person provide emotional support, crisis intervention, ation, and referrals? $oxtimes$ Yes \oxtimes No
115.21	(f)	
-	agency (e) of the	gency itself is not responsible for investigating allegations of sexual abuse, has the requested that the investigating entity follow the requirements of paragraphs (a) through his section? (N/A if the agency/facility is responsible for conducting criminal AND strative sexual abuse investigations.) \boxtimes Yes \square No \square NA
115.21	(g)	
•	Auditor	is not required to audit this provision.
115.21	(h)	
•	member to server issues	gency uses a qualified agency staff member or a qualified community-based staff or the purposes of this section, has the individual been screened for appropriateness in this role and received education concerning sexual assault and forensic examination in general? [N/A if agency attempts to make a victim advocate from a rape crisis center le to victims per 115.21(d) above.] \square Yes \square No \boxtimes NA
Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instruc	ctions f	or Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

All alleged victims of sexual assault can be taken to the Harborview Hospital that is in Seattle, Washington. There the victim will receive the same care that is afforded the community. The detention center publishes a phone number that can be called by the inmates to speak with a sexual assault advocate. If an inmate is taken to the hospital there is a sexual assault advocate available for them. Jail Health also has mental health counselors that can provide services to the victim.

Standard 115.22: Policies to ensure referrals of allegations for investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

All res/No Questions must be Answered by the Auditor to Complete the Report
115.22 (a)
■ Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? ✓ Yes No
■ Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? ✓ Yes ✓ No
115.22 (b)
■ Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? ⊠ Yes □ No
■ Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? ✓ Yes No
■ Does the agency document all such referrals? Yes □ No
115.22 (c)
■ If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? [N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).] ⊠ Yes □ No □ NA
115.22 (d)
 Auditor is not required to audit this provision.

Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

115.22 (e)

		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions f	or Overall Compliance Determination Narrative
complia conclu- not me	ance or sions. T eet the si	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
King County has policies and practices that ensure all allegations of sexual abuse and sexual harassment are thoroughly investigated. Through reviews of investigative files and incident reports it was determined that all allegations from detainee, staff or outside source are taken seriously. All are documented and followed to include informing the victim of the outcome of the investigation and producing an incident review meeting to discuss the investigation once it is closed.		
		TRAINING AND EDUCATION
Stan	dard 1	l15.31: Employee training
All Ye	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report
115.31	(a)	
•		he agency train all employees who may have contact with inmates on its zero-tolerance for sexual abuse and sexual harassment? \boxtimes Yes \square No
•		he agency train all employees who may have contact with inmates on how to fulfill their
	reporti	sibilities under agency sexual abuse and sexual harassment prevention, detection, ng, and response policies and procedures? \boxtimes Yes $\ \square$ No
•	Does t	
	Does to the does t	ng, and response policies and procedures? ⊠ Yes □ No he agency train all employees who may have contact with inmates on inmates' right to be

•	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? \boxtimes Yes \square No
•	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? \boxtimes Yes \square No
•	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? \boxtimes Yes \square No
•	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? \boxtimes Yes \square No
•	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? \boxtimes Yes \square No
115.31	(b)
•	Is such training tailored to the gender of the inmates at the employee's facility? $oximes$ Yes \odots No
•	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa? \square Yes \square No
115.31	(c)
•	Have all current employees who may have contact with inmates received such training? $\ \ \boxtimes$ Yes $\ \ \Box$ No
•	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures? \boxtimes Yes \square No
•	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies? \boxtimes Yes \square No
115.31	(d)
•	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? \boxtimes Yes \square No
Audito	or Overall Compliance Determination
	•
	Exceeds Standard (Substantially exceeds requirement of standards)

		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	
Instru	ctions 1	for Overall Compliance Determination Narrative	
compli conclu not me	ance or sions. T eet the s	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.	
staff and Staff whitnes	Reviews of the lesson plans provided to staff who have contact with the inmate, random interviews with staff and a review of the training roster provided sufficient evidence that this standard is being met. Staff were very knowledgeable of the importance of treating inmates with dignity and respect. This was witnessed by the auditor and also learned in the random interviews with the inmatess. Because the facility houses both male and female detainees it is important that staff are trained in both genders.		
Stan	dard 1	I15.32: Volunteer and contractor training	
All Ye	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report	
115.32	2 (a)		
•	been to	e agency ensured that all volunteers and contractors who have contact with inmates have rained on their responsibilities under the agency's sexual abuse and sexual harassment ition, detection, and response policies and procedures? \boxtimes Yes \square No	
115.32	2 (b)		
•	agency how to contract	all volunteers and contractors who have contact with inmates been notified of the y's zero-tolerance policy regarding sexual abuse and sexual harassment and informed report such incidents (the level and type of training provided to volunteers and ctors shall be based on the services they provide and level of contact they have with s)? \boxtimes Yes \square No	
115.32	2 (c)		
•		he agency maintain documentation confirming that volunteers and contractors stand the training they have received? \boxtimes Yes \square No	
Audito	or Over	all Compliance Determination	
		Exceeds Standard (Substantially exceeds requirement of standards)	

	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instruc	tions f	or Overall Compliance Determination Narrative
complia conclus not mee	ance or a sions. The et the st	nelow must include a comprehensive discussion of all the evidence relied upon in making the mon-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does and and another the most be included in the Final Report, accompanied by specific corrective actions taken by the facility.
random if an inn and con toleran	n intervi mate pr ntractor ce polic	ew of the training information that is shared with volunteers and contractors as well as ews with volunteers and contractors it was determined that they were aware of their role ovided information to them that they were or had been sexually harassed. The volunteers is were very knowledgeable of their role in what to do and very aware of the zero by. The volunteers interviewed were very complimentary of the professionalism of the staff ey witnessed the interaction with staff and inmates.
Stand	dard 1	15.33: Inmate education
All Yes	s/No Qι	estions Must Be Answered by the Auditor to Complete the Report
115.33	(a)	
•	_	intake, do inmates receive information explaining the agency's zero-tolerance policy ng sexual abuse and sexual harassment? \boxtimes Yes \square No
•	•	intake, do inmates receive information explaining how to report incidents or suspicions of abuse or sexual harassment? \boxtimes Yes \square No
115.33	(b)	
•	person	30 days of intake, does the agency provide comprehensive education to inmates either in or through video regarding: Their rights to be free from sexual abuse and sexual ment? \boxtimes Yes \square No
•	person	30 days of intake, does the agency provide comprehensive education to inmates either in or through video regarding: Their rights to be free from retaliation for reporting such ts? \boxtimes Yes \square No
•	person	30 days of intake, does the agency provide comprehensive education to inmates either in or through video regarding: Agency policies and procedures for responding to such ts? \boxtimes Yes \square No
115 33	(c)	

■ Have all inmates received such education? Yes □ No		
 ■ Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility? ☑ Yes □ No 		
115.33 (d)		
■ Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? ⊠ Yes □ No		
■ Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? ✓ Yes ✓ No		
■ Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? ⊠ Yes □ No		
■ Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? ✓ Yes ✓ No		
■ Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? ✓ Yes ✓ No		
115.33 (e)		
 ■ Does the agency maintain documentation of inmate participation in these education sessions? ☑ Yes □ No 		
115.33 (f)		
• In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats? ⋈ Yes □ No		
Auditor Overall Compliance Determination		
☐ Exceeds Standard (Substantially exceeds requirement of standards)		
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
□ Does Not Meet Standard (Requires Corrective Action)		
Instructions for Overall Compliance Determination Narrative		

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DAJD has completed multiple changes to ensure that inmates receive multiple exposures to PREA information over time to best understand the information received. Inmates receive protocols at intake and sign for this information that the auditor witnessed. They receive a PREA brochure at their 14 day health assessment. The clinic has a location for these brochures that are available at any time. Also the brochures are in the housing areas. The PREA Compliance manager will ensure that this information is available to inmates.

Standard 115.34: Specialized training: Investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

•	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) \boxtimes Yes \square No \square NA
115.34	(b)
•	Does this specialized training include techniques for interviewing sexual abuse victims? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] \boxtimes Yes \square No \square NA
•	Does this specialized training include proper use of Miranda and Garrity warnings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] \boxtimes Yes \square No \square NA
•	Does this specialized training include sexual abuse evidence collection in confinement settings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] \boxtimes Yes \square No \square NA
•	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? [N/A if the agency does not conduct any form of

administrative or criminal sexual abuse investigations. See 115.21(a).] ⊠ Yes □ No □ NA

 Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] ☑ Yes □ No □ NA 	
115.34 (d)	
 Auditor is not required to audit this provision. 	
Auditor Overall Compliance Determination	
☐ Exceeds Standard (Substantially exceeds requirement of standards)	
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
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All investigators with the Special Investigations Unit (SIU) have received training from the Institute of Police Technology and Management in Florida. They work closely with the Seattle Police Department and Kent Police Department if any allegations involve staff at the jail. There are 3 Sergeants in the SIU who handle employment background, mail monitoring, phone recording, criminal investigations and death inside a jail. They deal with all infractions on the inmates. They are involved in the incident review following a sexual assault case after the case has been closed. An inmate on inmate case is started by the shift sergeant. All cases used preponderance of the evidence. The investigator is the person who meets with the inmate and presents them with the closure letter following the closure of the case. The auditor witnessed those letters being used and documented. Videotapes/digital recordings of the cameras are available for 60 days. This has been useful in proving a case was not legitimate and has also brought down the number of allegations where the inmates know cameras are present.	

Standard 115.35: Specialized training: Medical and mental health care

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.35 (a)

•	who w	the agency ensure that all full- and part-time medical and mental health care practitioners ork regularly in its facilities have been trained in how to detect and assess signs of sexual and sexual harassment? \boxtimes Yes \square No	
•	who w	the agency ensure that all full- and part-time medical and mental health care practitioners ork regularly in its facilities have been trained in how to preserve physical evidence of abuse? \boxtimes Yes \square No	
•	who w	the agency ensure that all full- and part-time medical and mental health care practitioners ork regularly in its facilities have been trained in how to respond effectively and sionally to victims of sexual abuse and sexual harassment? \boxtimes Yes \square No	
•	who w	the agency ensure that all full- and part-time medical and mental health care practitioners ork regularly in its facilities have been trained in how and to whom to report allegations or ions of sexual abuse and sexual harassment? \boxtimes Yes \square No	
115.35	(b)		
•	receive	ical staff employed by the agency conduct forensic examinations, do such medical staff e appropriate training to conduct such examinations? (N/A if agency medical staff at the do not conduct forensic exams.) \square Yes \square No \boxtimes NA	
115.35	i (c)		
•	receive	the agency maintain documentation that medical and mental health practitioners have ed the training referenced in this standard either from the agency or elsewhere? \Box No	
115.35	i (d)		
•	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? \boxtimes Yes \square No		
•		edical and mental health care practitioners contracted by and volunteering for the agency eceive training mandated for contractors and volunteers by §115.32? Yes □ No	
Audito	or Over	all Compliance Determination	
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	

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Through interviews with the medical director and the mental health director it was determined that all staff have received the training provided to all staff and they have received specialized training. They are part of the Jail Health Division which is part of the King County Public Health. There is always a medical person on call so if any issues regarding a sexual assault and the need to send them to the hospital the on call medical person is able to help with the decision making. The auditor reviewed the healthcare training and was able to ask questions to determine both directors were clear of their role and the role of their staff. The medical director of Jail Health sits on the Transgender Review committee.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.41	(a)
•	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? \boxtimes Yes \square No
•	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? \boxtimes Yes \square No
115.41	(b)
•	Do intake screenings ordinarily take place within 72 hours of arrival at the facility? $\ \boxtimes$ Yes $\ \square$ No
115.41	(c)
•	Are all PREA screening assessments conducted using an objective screening instrument? \boxtimes Yes $\ \square$ No
115.41	(d)

Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental

disability? ⊠ Yes □ No

•	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate? \boxtimes Yes \square No
•	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate? \boxtimes Yes \square No
•	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated? \boxtimes Yes \square No
•	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent? \boxtimes Yes \square No
•	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child? \boxtimes Yes \square No
•	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? \boxtimes Yes \square No
•	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization? \boxtimes Yes \square No
•	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability? \boxtimes Yes \square No
•	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? \boxtimes Yes \square No
115.41	(e)
•	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse? \boxtimes Yes \square No
•	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses? \boxtimes Yes \square No

•	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse? \boxtimes Yes \square No			
115.41	(f)			
•	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? \boxtimes Yes \square No			
115.41	(g)			
•	Does the facility reassess an inmate's risk level when warranted due to a: Referral? $\ \ \boxtimes$ Yes $\ \ \Box$ No			
•	Does the facility reassess an inmate's risk level when warranted due to a: Request? $\ \ \boxtimes Yes \ \ \Box No$			
•	Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse? \boxtimes Yes $\ \square$ No			
•	Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? \boxtimes Yes \square No			
115.41	(h)			
•	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section? \boxtimes Yes \square No			
115.41	(i)			
•	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? \boxtimes Yes \square No			
Audito	r Overall Compliance Determination			
	☐ Exceeds Standard (Substantially exceeds requirement of standards)			
	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)			
	□ Does Not Meet Standard (Requires Corrective Action)			

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The King County Detention Facility has developed a very thorough PREA Risk Assessment for all detainees who enter the MRJC. With consultation from the Washington Department of Corrections they are using a similar instrument which will be helpful when inmates that have been housed in a state prison come to the jail. The information in the risk assessment has limited access. The auditor has reviewed the risk assessment and the data collected. This meets the standard

Standard 115.42: Use of screening information

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

5.42 (a)				
•	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments? \boxtimes Yes \square No			
•	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments? \boxtimes Yes \square No			
•	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? \boxtimes Yes \square No			
•	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? \boxtimes Yes \square No			
•	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? \boxtimes Yes \square No			
.42	2 (b)			

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Does the agency make individualized determinations about how to ensure the safety of each inmate? ⊠ Yes □ No

115.42 (c)

When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider on a case-by-case basis whether a placement would

	ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? \boxtimes Yes \square No
•	When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? \boxtimes Yes \square No
15.42	2 (d)
•	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate? \boxtimes Yes \square No
15.42	? (e)
•	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? \boxtimes Yes \square No
15.42	2 (f)
•	Are transgender and intersex inmates given the opportunity to shower separately from other inmates? \boxtimes Yes $\ \square$ No
15.42	? (g)
•	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? \boxtimes Yes \square No
•	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? \boxtimes Yes \square No
•	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? \boxtimes Yes \square No

PREA Audit Report

Auditor Overall Compliance Determination

		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instruc	ctions f	or Overall Compliance Determination Narrative
complia conclus not me	ance or sions. The st	nelow must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does andard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
enviror to help transge	nments. protect ender in	using the PREA Risk Assessment information to place inmates in housing and in work The scoring of the inmates in assessment are being used in the most appropriate way inmates from potential sexual abuse. The portion of this standard that addresses dividuals is being met also. The use of the transgender review committee is a useful tool detainee who comes to the jail and identifies themselves as a transgender.
Stand	dard 1	15.43: Protective Custody
All Yes	s/No Qu	uestions Must Be Answered by the Auditor to Complete the Report
115.43	(a)	
•	involun made,	he facility always refrain from placing inmates at high risk for sexual victimization in tary segregated housing unless an assessment of all available alternatives has been and a determination has been made that there is no available alternative means of tion from likely abusers? \boxtimes Yes \square No
•	involun	ility cannot conduct such an assessment immediately, does the facility hold the inmate in tary segregated housing for less than 24 hours while completing the assessment? $\hfill\square$ No
115.43	(b)	
•		ates who are placed in segregated housing because they are at high risk of sexual ration have access to: Programs to the extent possible? \boxtimes Yes \square No
•		ates who are placed in segregated housing because they are at high risk of sexual ration have access to: Privileges to the extent possible? \boxtimes Yes \square No
•		ates who are placed in segregated housing because they are at high risk of sexual ration have access to: Education to the extent possible? \boxtimes Yes \square No

•	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? \boxtimes Yes \square No					
•		acility restricts access to programs, privileges, education, or work opportunities, does the document: The opportunities that have been limited? \boxtimes Yes \square No				
•		acility restricts access to programs, privileges, education, or work opportunities, does the document: The duration of the limitation? \boxtimes Yes \square No				
•		acility restricts access to programs, privileges, education, or work opportunities, does the document: The reasons for such limitations? \boxtimes Yes \square No				
115.43	3 (c)					
•	housin	the facility assign inmates at high risk of sexual victimization to involuntary segregated \log only until an alternative means of separation from likely abusers can be arranged? \square No				
•	Does	such an assignment not ordinarily exceed a period of 30 days? ⊠ Yes □ No				
115.43	3 (d)					
•	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety? \boxtimes Yes \square No					
•	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? \boxtimes Yes \square No					
115.43	3 (e)					
•	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? ⊠ Yes □ No					
Auditor Overall Compliance Determination						
		Exceeds Standard (Substantially exceeds requirement of standards)				
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)				
		Does Not Meet Standard (Requires Corrective Action)				
	-4!4	for Overall Compliance Determination Nametics				

The auditor reviewed the placement of inmates into Restrictive Housing. There were no cases found where an inmate had been placed in restrictive housing for the sole purpose of protecting the inmate. Through random interviews with inmates none were aware of being placed in RHU if they were to report that they were being sexually assaulted.

	REPORTING
Standard 1	I15.51: Inmate reporting
All Yes/No Qu	uestions Must Be Answered by the Auditor to Complete the Report
115.51 (a)	
	he agency provide multiple internal ways for inmates to privately report: Sexual abuse xual harassment? \boxtimes Yes $\ \square$ No
	he agency provide multiple internal ways for inmates to privately report: Retaliation by nmates or staff for reporting sexual abuse and sexual harassment? \boxtimes Yes \square No
	he agency provide multiple internal ways for inmates to privately report: Staff neglect or on of responsibilities that may have contributed to such incidents? \boxtimes Yes \square No
115.51 (b)	
	he agency also provide at least one way for inmates to report sexual abuse or sexual ment to a public or private entity or office that is not part of the agency? \boxtimes Yes \square No
•	private entity or office able to receive and immediately forward inmate reports of sexual and sexual harassment to agency officials? \boxtimes Yes \square No
	hat private entity or office allow the inmate to remain anonymous upon request? $\hfill\Box$ No
contact	mates detained solely for civil immigration purposes provided information on how to t relevant consular officials and relevant officials at the Department of Homeland ty? \boxtimes Yes \square No

115.51 (c)

•	■ Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? \boxtimes Yes \square No		
•		staff promptly document any verbal reports of sexual abuse and sexual harassment? $\hfill\square$ No	
115.51	(d)		
•		he agency provide a method for staff to privately report sexual abuse and sexual ment of inmates? $oxtimes$ Yes \oxtimes No	
Audito	r Overa	all Compliance Determination	
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	
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complia conclus not me	ance or sions. The st	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does randard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.	
placing Therefo	a call t	as shown how an inmate Personal Identification Number (PIN) is not recorded when to report sexual abuse or to receive assistance from a sexual assault counselor. A sing this anonymous. The reporting methods for staff and inmates meet the requirements d.	
Standard 115.52: Exhaustion of administrative remedies			
All Yes	s/No Qu	uestions Must Be Answered by the Auditor to Complete the Report	
115.52	(a)		
•	have a does n ordinar explicit	agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not dministrative procedures to address inmate grievances regarding sexual abuse. This ot mean the agency is exempt simply because an inmate does not have to or is not rily expected to submit a grievance to report sexual abuse. This means that as a matter of policy, the agency does not have an administrative remedies process to address sexual \square Yes \square No \bowtie NA	
115.52	(b)		

•	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) \square Yes \square No \boxtimes NA
•	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) \square Yes \square No \boxtimes NA
115.52	2 (c)
•	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) \square Yes \square No \boxtimes NA
•	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) \square Yes \square No \boxtimes NA
115.52	2 (d)
	Does the agency issue a final agency decision on the merits of any portion of a grievance
	alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) \square Yes \square No \boxtimes NA
•	If the agency claims the maximum allowable extension of time to respond of up to 70 days per $115.52(d)(3)$ when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.) \square Yes \square No \boxtimes NA
-	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) \square Yes \square No \boxtimes NA
115.52	2 (e)
•	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) \square Yes \square No \boxtimes NA
-	Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) \square Yes \square No \boxtimes NA

•	docum	nmate declines to have the request processed on his or her behalf, does the agency tent the inmate's decision? (N/A if agency is exempt from this standard.) \square No \square NA
115.52	(f)	
	Has th inmate	e agency established procedures for the filing of an emergency grievance alleging that an is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from andard.) \square Yes \square No \boxtimes NA
•	immine thereof immed	eceiving an emergency grievance alleging an inmate is subject to a substantial risk of ent sexual abuse, does the agency immediately forward the grievance (or any portion f that alleges the substantial risk of imminent sexual abuse) to a level of review at which liate corrective action may be taken? (N/A if agency is exempt from this standard.). \square No \square NA
•		eceiving an emergency grievance described above, does the agency provide an initial ase within 48 hours? (N/A if agency is exempt from this standard.) \square Yes \square No \boxtimes NA
•	decisio	eceiving an emergency grievance described above, does the agency issue a final agency on within 5 calendar days? (N/A if agency is exempt from this standard.) \square No \square NA
•	whethe	he initial response and final agency decision document the agency's determination er the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt his standard.) \square Yes \square No \boxtimes NA
•		he initial response document the agency's action(s) taken in response to the emergency nce? (N/A if agency is exempt from this standard.) \square Yes \square No \boxtimes NA
•		he agency's final decision document the agency's action(s) taken in response to the ency grievance? (N/A if agency is exempt from this standard.) \square Yes \square No \boxtimes NA
115.52	(g)	
•	do so (agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? agency is exempt from this standard.) \square Yes \square No \boxtimes NA
Audito	r Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The grievance form can be used to report sexual harassment or abuse but it is immediately passed on to the PCM and then an investigation is opened. The grievance is not tracked simultaneously with the investigation. The inmate is kept informed through the investigation process and is given the outcome of the investigation in writing.

Standard 115.53: Inmate access to outside confidential support services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.53	3 (a)
•	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? \boxtimes Yes \square No
•	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? \boxtimes Yes \square No
•	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? \boxtimes Yes \square No
115.53	3 (b)
•	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? \boxtimes Yes \square No
115.53	3 (c)
•	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? \boxtimes Yes \square No
•	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? \boxtimes Yes \square No

Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
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Instru	ctions f	or Overall Compliance Determination Narrative
compli conclu not me	ance or sions. The st	below must include a comprehensive discussion of all the evidence relied upon in making the mon-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does and and an arrangement of the second panied by specific corrective actions taken by the facility.
record		ave been informed that the call is confidential. It is anonymous because their PIN is not auditor saw posters and flyers where this information is shared with the inmate he jail
Stan	dard 1	15.54: Third-party reporting
All Ye	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report
115.54	l (a)	
•		e agency established a method to receive third-party reports of sexual abuse and sexual ment? \boxtimes Yes $\ \square$ No
•		e agency distributed publicly information on how to report sexual abuse and sexual ment on behalf of an inmate? $oxtimes$ Yes \oxtimes No
Audito	or Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
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conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The manner to report any issue regarding an inmate is published. The call coming in to the detention facility is taken by a live operator who then can report it to the shift commander immediately. During random interviews with staff the auditor spoke with a Correctional Tech who could speak first hand on how this process works and the seriousness that is taken. The correctional tech was trained to be compassionate and listen to the third party who was calling on the inmates behalf.

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

1	15.	.61	(a)
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115.61	(a)
•	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? \boxtimes Yes \square No
•	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? \boxtimes Yes \square No
•	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? \boxtimes Yes \square No
115.61	(b)
•	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?

115.61 (c)

- Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section? ⊠ Yes □ No
- Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? \boxtimes Yes \square No

115.61	(d)	
	If the a	alleged victim is under the age of 18 or considered a vulnerable adult under a State or
		ulnerable persons statute, does the agency report the allegation to the designated State II services agency under applicable mandatory reporting laws? \boxtimes Yes \square No
115.61	(e)	
•		he facility report all allegations of sexual abuse and sexual harassment, including third-ind anonymous reports, to the facility's designated investigators? \boxtimes Yes \square No
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	_	
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Reviewing the policy regarding reporting and conducting interviews with staff it was determined that all know the importance of reporting anything they see or hear. Medical and Mental health employees explain to the inmates the mandatory reporting guidance they must adhere to prior to the inmate speaking with them.		
Stan	dard ′	115.62: Agency protection duties
All Ye	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report
115.62	? (a)	
•		the agency learns that an inmate is subject to a substantial risk of imminent sexual does it take immediate action to protect the inmate? \boxtimes Yes \square No
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)

	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
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complia conclus not me	ance or sions. T et the s	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
mport	ance of	ews with shift supervisors and with staff it was made clear to the auditor that all know the protecting the inmate. All staff would immediately take the necessary action to protect m potential harm. This is also documented in post orders and in policies.
_		
Stan	dard 1	115.63: Reporting to other confinement facilities
All Ye	s/No Q	uestions Must Be Answered by the Auditor to Complete the Report
115.63	3 (a)	
•	facility	receiving an allegation that an inmate was sexually abused while confined at another, does the head of the facility that received the allegation notify the head of the facility or priate office of the agency where the alleged abuse occurred? \boxtimes Yes \square No
115.63	(b)	
•		n notification provided as soon as possible, but no later than 72 hours after receiving the tion? \boxtimes Yes $\ \square$ No
115.63	3 (c)	
•	Does t	the agency document that it has provided such notification? $oxtimes$ Yes \odots No
115.63	3 (d)	
•		the facility head or agency office that receives such notification ensure that the allegation stigated in accordance with these standards? \boxtimes Yes \square No
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)

	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions 1	for Overall Compliance Determination Narrative
compli conclu- not me	ance or sions. T eet the s	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
prison prison receive witnes	anywhe or jail w ed if and sed lette	nvestigations Unit takes the lead in reporting any allegations they learn of to another jail or ere in the country. They will provide the information given to them by the inmate to the where the alleged activity occurred. This would also be where information would be other jail or prison were to learn of anything allegedly occurring at MRJC. The auditor ers that had been sent to other jails informing them of the allegations and the information ded to them by the detainee.
Stan	dard 1	115.64: Staff first responder duties
All Ye	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report
115.64	l (a)	
•	memb	earning of an allegation that an inmate was sexually abused, is the first security staff er to respond to the report required to: Separate the alleged victim and abuser? \Box No
•	membe	earning of an allegation that an inmate was sexually abused, is the first security staff er to respond to the report required to: Preserve and protect any crime scene until priate steps can be taken to collect any evidence? \boxtimes Yes \square No
•	member actions changi	earning of an allegation that an inmate was sexually abused, is the first security staff er to respond to the report required to: Request that the alleged victim not take any s that could destroy physical evidence, including, as appropriate, washing, brushing teeth, ing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred a time period that still allows for the collection of physical evidence? \boxtimes Yes \square No
•	member actions changi	earning of an allegation that an inmate was sexually abused, is the first security staff er to respond to the report required to: Ensure that the alleged abuser does not take any is that could destroy physical evidence, including, as appropriate, washing, brushing teeth, ing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred a time period that still allows for the collection of physical evidence? \boxtimes Yes \square No

115.64 (b)	
that th	irst staff responder is not a security staff member, is the responder required to request e alleged victim not take any actions that could destroy physical evidence, and then notify ty staff? \boxtimes Yes \square No
Auditor Over	all Compliance Determination
	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)
Instructions	for Overall Compliance Determination Narrative
compliance or conclusions. To meet the s	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
During random interviews with staff they were fully aware of the procedure should an inmate report to them that they had been sexually assaulted. They each knew of the importance of preserving the evidence as soon as they learned of the assault and to protect the inmate. They knew well the importance of keeping the inmate with them. The informed the auditor they would call for their supervisor to assist with separating inmates should the perpetrator be identified.	
Standard	115.65: Coordinated response
All Yes/No Q	uestions Must Be Answered by the Auditor to Complete the Report
115.65 (a)	
respor	he facility developed a written institutional plan to coordinate actions among staff first inders, medical and mental health practitioners, investigators, and facility leadership taken bonse to an incident of sexual abuse? \boxtimes Yes \square No
Auditor Over	all Compliance Determination
	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

□ Does Not Meet Standard (Requires Corrective Action)
Instructions for Overall Compliance Determination Narrative
The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.
There is a medical triage area within medical where the detainee could be taken to be examined and then transported to the hospital for a Sexual Assault Exam. The security and Jail Health work closely together in all aspects of providing the best medical care for an inmate who has been sexually assaulted. Interviews with medical and with security made it clear to the auditor that each know their role in the process.
Standard 115.66: Preservation of ability to protect inmates from contact with abusers
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.66 (a)
■ Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?
115.66 (b)
 Auditor is not required to audit this provision.
Auditor Overall Compliance Determination
☐ Exceeds Standard (Substantially exceeds requirement of standards)
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (Requires Corrective Action)
Instructions for Overall Compliance Determination Narrative

During interviews with staff it was made clear that the Union for security staff are very supportive of appropriate corrective action to include termination with staff who cross the line of proper professional relationship with the detainee. It was clearly stated by all interviewed that an unprofessional correctional officer and staff was not wanted as part of the King County team.

Standard 115.67: Agency protection against retaliation

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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115.67	(a)
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? \boxtimes Yes \square No Has the agency designated which staff members or departments are charged with monitoring retaliation? \boxtimes Yes \square No
115.67	' (b)
•	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting

115.67 (c)

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? \boxtimes Yes \square No

sexual abuse or sexual harassment or for cooperating with investigations? ⊠ Yes □ No

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? ⊠ Yes □ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? ⊠ Yes □ No

•	for at lea	n instances where the agency determines that a report of sexual abuse is unfounded, ast 90 days following a report of sexual abuse, does the agency: Monitor any inmate ary reports? ⊠ Yes □ No
•	for at lea	in instances where the agency determines that a report of sexual abuse is unfounded, ast 90 days following a report of sexual abuse, does the agency: Monitor inmate housing s? \boxtimes Yes \square No
•	for at lea	n instances where the agency determines that a report of sexual abuse is unfounded, ast 90 days following a report of sexual abuse, does the agency: Monitor inmate of changes? ⊠ Yes □ No
•	for at lea	in instances where the agency determines that a report of sexual abuse is unfounded, ast 90 days following a report of sexual abuse, does the agency: Monitor negative ance reviews of staff? \boxtimes Yes \square No
•	for at lea	in instances where the agency determines that a report of sexual abuse is unfounded, ast 90 days following a report of sexual abuse, does the agency: Monitor reassignments \boxtimes Yes \square No
•		e agency continue such monitoring beyond 90 days if the initial monitoring indicates a ng need? \boxtimes Yes $\ \square$ No
115.67	(d)	
•	In the ca ⊠ Yes	ase of inmates, does such monitoring also include periodic status checks?
115.67	(e)	
•		ther individual who cooperates with an investigation expresses a fear of retaliation, does not take appropriate measures to protect that individual against retaliation?
115.67	(f)	
•	Auditor	is not required to audit this provision.
Audito	r Overa	Il Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The duty of monitoring falls on the responsibility of classification. Through interviews the auditor learned that the classification worker brings the inmate into the office for a private meeting. This is incorporated with other classification work. The inmate is asked "how are they treating you? Has anything changed since you reported this?" This allows the inmate to share any information they wish to share. The classification worker will talk with the officers on the living unit to see how the detainee is adjusting.

Standard 115.68: Post-allegation protective custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?

☑ Yes □ No

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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Segregated housing is not used so that the victim who has brought allegations does not appear to be the one being punished. This is important as you are trying to promote a culture of reporting.

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report			
115.71 (a)			
When the agency conducts its own investigations into allegations of sexual abuse and sex harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility responsible for conducting any form of criminal OR administrative sexual abuse investigat See 115.21(a).] ⋈ Yes □ No □ NA	is not		
■ Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form criminal OR administrative sexual abuse investigations. See 115.21(a).] ⊠ Yes □ No □	of □ NA		
115.71 (b)			
Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? ⋈ Yes □ No			
115.71 (c)			
■ Do investigators gather and preserve direct and circumstantial evidence, including any available and DNA evidence and any available electronic monitoring data? ⊠ Yes □ No	ailable		
 ■ Do investigators interview alleged victims, suspected perpetrators, and witnesses? ☑ Yes □ No 			
■ Do investigators review prior reports and complaints of sexual abuse involving the suspect perpetrator? ⊠ Yes □ No	ted		
115.71 (d)			
When the quality of evidence appears to support criminal prosecution, does the agency compelled interviews only after consulting with prosecutors as to whether compelled interview may be an obstacle for subsequent criminal prosecution? ⋈ Yes □ No			
115.71 (e)			
$lacktriangled{\bullet}$ Do agency investigators assess the credibility of an alleged victim, suspect, or witness on individual basis and not on the basis of that individual's status as inmate or staff? \boxtimes Yes	an □ No		
■ Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as condition for proceeding? ⊠ Yes □ No	а		

115.71	(f)		
•	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? \boxtimes Yes \square No		
•	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? \boxtimes Yes \square No		
115.71	(g)		
-	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? \boxtimes Yes \square No		
115.71	(h)		
•	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? \boxtimes Yes \square No		
115.71	(i)		
•	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? \boxtimes Yes \square No		
115.71	(i)		
•	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation? ☑ Yes □ No		
115.71	(k)		
•	Auditor is not required to audit this provision.		
115.71	(1)		
•	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) \boxtimes Yes \square No \square NA		
Audito	r Overall Compliance Determination		
	☐ Exceeds Standard (Substantially exceeds requirement of standards)		
	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		

☐ Does Not Meet Standard (Requires Corrective Action)			
Instructions for Overall Compliance Determination Narrative			
The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.			
The auditor reviewed a number of cases to include alleged sexual assault and harassment. Each case was thoroughly documented and investigated. Staff and inmates when interviewed know the seriousness of allegations and know that it investigated completely. With these cases were notations of camera usage and the ability to review the recorded footage.			
Standard 115.72: Evidentiary standard for administrative investigations			
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report			
115.72 (a)			
Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated? ⋈ Yes □ No			
Auditor Overall Compliance Determination			
☐ Exceeds Standard (Substantially exceeds requirement of standards)			
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)			
□ Does Not Meet Standard (Requires Corrective Action)			
Instructions for Overall Compliance Determination Narrative			

All investigators with the Special Investigative Unit have been through numerous training courses to ensure that the investigations are thorough and complete. If it is does not rise to level of criminal then the process has been done to deal with the issue administratively.

Standard 115.73: Reporting to inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

All Tes	Who Questions must be Answered by the Additor to Complete the Report
115.73	(a)
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? \boxtimes Yes \square No
115.73	(b)
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) \boxtimes Yes \square No \square NA
115.73	(c)
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit? \boxtimes Yes \square No
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility? \boxtimes Yes \square No
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? \boxtimes Yes \square No
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? \boxtimes Yes \square No
115.73	(d)
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility? Yes □ No

•	does that	ing an inmate's allegation that he or she has been sexually abused by another inmate, he agency subsequently inform the alleged victim whenever: The agency learns that the displayed abuser has been convicted on a charge related to sexual abuse within the facility? \square No
115.73	(e)	
•	Does t	he agency document all such notifications or attempted notifications? $oxtimes$ Yes \odots No
115.73	(f)	
	Audito	r is not required to audit this provision.
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instruc	ctions f	or Overall Compliance Determination Narrative
complia conclus not me	ance or sions. Ti et the st	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
The auditor when reviewing files witnessed the documentation that had been given to the inmate informing them of the outcome of the investigations. This is a letter that comes from the SIU. In some files there was a copy of the letter that had been mailed to the last known address of the inmate because they had been released from the jail prior to the case being closed. This was evidence that once an investigation is closed there is due diligence to let the accuser know the outcome.		
		DISCIPLINE
Stand	dard 1	115.76: Disciplinary sanctions for staff
		uestions Must Be Answered by the Auditor to Complete the Report
115.76	(a)	

	pject to disciplinary sanctions up to and including termination for violating agency e or sexual harassment policies? \boxtimes Yes \square No
115.76 (b)	
■ Is termination abuse? ⊠	on the presumptive disciplinary sanction for staff who have engaged in sexual Yes $\ \square$ No
115.76 (c)	
 Are disciplin harassment circumstanc 	ary sanctions for violations of agency policies relating to sexual abuse or sexual (other than actually engaging in sexual abuse) commensurate with the nature and les of the acts committed, the staff member's disciplinary history, and the sanctions comparable offenses by other staff with similar histories? Yes No
115.76 (d)	
()	
resignations	nations for violations of agency sexual abuse or sexual harassment policies, or by staff who would have been terminated if not for their resignation, reported to: ement agencies (unless the activity was clearly not criminal)? \boxtimes Yes \square No
resignations	nations for violations of agency sexual abuse or sexual harassment policies, or by staff who would have been terminated if not for their resignation, reported to: ensing bodies? \boxtimes Yes \square No
Auditor Overall Co	ompliance Determination
☐ Exce	eeds Standard (Substantially exceeds requirement of standards)
	ts Standard (Substantial compliance; complies in all material ways with the dard for the relevant review period)
☐ Does	s Not Meet Standard (Requires Corrective Action)
Instructions for O	verall Compliance Determination Narrative

Sexual abuse cases by staff are referred to the Kent Police Department and will be prosecuted. The relationship with Kent PD is a close one and they are able to assist when the detention center has a charge of a criminal nature. If the employee is allowed to resign the investigation continues. Any and all allegations of sexual misconduct with a staff and inmate are taken seriously.

Standard 115.77: Corrective action for contractors and volunteers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.77	(a)	
•	•	contractor or volunteer who engages in sexual abuse prohibited from contact with s? $oxed{\boxtimes} {\sf Yes} {\sf \square} {\sf No}$
•	•	contractor or volunteer who engages in sexual abuse reported to: Law enforcement es (unless the activity was clearly not criminal)? \boxtimes Yes \square No
•	•	contractor or volunteer who engages in sexual abuse reported to: Relevant licensing ? \boxtimes Yes $\ \square$ No
115.77	(b)	
•	contrac	case of any other violation of agency sexual abuse or sexual harassment policies by a ctor or volunteer, does the facility take appropriate remedial measures, and consider to prohibit further contact with inmates? \boxtimes Yes \square No
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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This information is in the policy and is also shared with the volunteers and contractors. In interviews with volunteers it was very clear that they knew the lines they were not supposed to cross at it relates to inmate relations even beyond that of a sexual nature. All volunteers must watch a video that is online and one that the auditor watched. This video is very clear on the expectations that are placed on the volunteers working at the Maleng Regional Justice Center.

Standard 115.78: Disciplinary sanctions for inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.78 (a)
Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? ⊠ Yes □ No
115.78 (b)
■ Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? Yes □ No
115.78 (c)
When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior? ⋈ Yes □ No
115.78 (d)
■ If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? □ Yes □ No
115.78 (e)
■ Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact? ⊠ Yes □ No
115.78 (f)
For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation? ⊠ Yes □ No
115.78 (g)
 Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) ☑ Yes □ No □ NA
Auditor Overall Compliance Determination
Exceeds Standard (Substantially exceeds requirement of standards)

	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
	Does Not Meet Standard (Requires Corrective Action)		
Instruction	ons for Overall Compliance Determination Narrative		
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investigat determine been chai that the be the inmate inferring to	It is a disciplinary infraction for inmates to have any type of sexual act. The allegations are still investigated whenever brought to the attention of the investigator. The inmates past behavior does not determine whether a case will be investigated. The auditor could find no case where the inmate had been charged with filing a false report regarding sexual abuse. During interviews with SIU it is believed that the best course of action is to investigate the allegations and if determined to be unfounded then the inmate would be informed of the outcome but in no way disciplined for filing the report or even inferring that it is a false report. It is believed by the MRJC that this will promote a culture of reporting which is what they are striving for.		
	MEDICAL AND MENTAL CARE		
Standa abuse	rd 115.81: Medical and mental health screenings; history of sexual		
All Yes/N	o Questions Must Be Answered by the Auditor to Complete the Report		
115.81 (a			
	the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior xual victimization, whether it occurred in an institutional setting or in the community, do staff		
en pra	sure that the inmate is offered a follow-up meeting with a medical or mental health actitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) Yes \square No \boxtimes NA		
en pra	actitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) Yes □ No ☒ NA		

•	victimiz that the	creening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual zation, whether it occurred in an institutional setting or in the community, do staff ensure a inmate is offered a follow-up meeting with a medical or mental health practitioner within s of the intake screening? \boxtimes Yes \square No
115.81	(d)	
•	setting inform educat	information related to sexual victimization or abusiveness that occurred in an institutional strictly limited to medical and mental health practitioners and other staff as necessary to treatment plans and security management decisions, including housing, bed, work, ion, and program assignments, or as otherwise required by Federal, State, or local law? \square No
115.81	(e)	
•	reportir	dical and mental health practitioners obtain informed consent from inmates before ng information about prior sexual victimization that did not occur in an institutional setting, the inmate is under the age of 18? \boxtimes Yes \square No
Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions f	or Overall Compliance Determination Narrative
The no	rrative b	valous must include a comprehensive discussion of all the evidence relied upon in making the

The information gathered during the PREA risk assessment is used by medical and mental health should the inmate request services. The risk assessment information is shared with medical. Medical and Mental health provided by Jail Health does obtained informed consent. During the auditors interview with Jail Health Behavioral Medicine it as determined that the inmates have access to counselors.

Standard 115.82: Access to emergency medical and mental health services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

t n	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical reatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment? ✓ Yes □ No
115.82 ((b)
S	f no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? \boxtimes Yes \square No
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners? \boxtimes Yes \square No
115.82 ((c)
ϵ	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? \boxtimes Yes \square No
115.82 ((d)
t	Are treatment services provided to the victim without financial cost and regardless of whether he victim names the abuser or cooperates with any investigation arising out of the incident? \boxtimes Yes \square No
Auditor	Overall Compliance Determination
[Exceeds Standard (Substantially exceeds requirement of standards)
[Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)
Instruct	tions for Overall Compliance Determination Narrative

The inmates are taken to Harborview Medical Center and are provided the same sexual assault exam and care they would receive if they were not at the jail. Interviews with the hospital staff confirmed that this was occurring.

115.82 (a)

Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.83 (a)
■ Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? Yes □ No
115.83 (b)
■ Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? ⊠ Yes □ No
115.83 (c)
■ Does the facility provide such victims with medical and mental health services consistent with the community level of care? ✓ Yes ✓ No
115.83 (d)
 Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)
115.83 (e)
• If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.) ⋈ Yes □ No □ NA
115.83 (f)
 Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?
115.83 (g)
 Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? ☑ Yes □ No

115.83 (h)		
inmate- when d	cility is a prison, does it attempt to conduct a mental health evaluation of all known on-inmate abusers within 60 days of learning of such abuse history and offer treatment eemed appropriate by mental health practitioners? (NA if the facility is a jail.) \square No \square NA	
Auditor Overa	II Compliance Determination	
	Exceeds Standard (Substantially exceeds requirement of standards)	
	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
	Does Not Meet Standard (Requires Corrective Action)	
Instructions fo	or Overall Compliance Determination Narrative	
The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.		
Jail Health is a division under King County Department of Health. The mental health staff at the jail have the resources available for the county. This can sometimes provide a seamless delivery of services because the now incarcerated individual was on someone's case load when they were on the street. If treatment services can't be provided while in the jail sometimes services can be made available when they are released from the jail.		
	DATA COLLECTION AND REVIEW	
Standard 1	15.86: Sexual abuse incident reviews	
All Yes/No Qu	estions Must Be Answered by the Auditor to Complete the Report	
115.86 (a)		
investig	be facility conduct a sexual abuse incident review at the conclusion of every sexual abuse ation, including where the allegation has not been substantiated, unless the allegation determined to be unfounded? \boxtimes Yes \square No	
115.86 (b)		
Does su	uch review ordinarily occur within 30 days of the conclusion of the investigation?	

 \boxtimes Yes \square No

115.86	(c)		
		he review team include upper-level management officials, with input from line isors, investigators, and medical or mental health practitioners? \boxtimes Yes \square No	
115.86	(d)		
		he review team: Consider whether the allegation or investigation indicates a need to e policy or practice to better prevent, detect, or respond to sexual abuse? \boxtimes Yes \square No	
	ethnicit	he review team: Consider whether the incident or allegation was motivated by race; ty; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or yed status; gang affiliation; or other group dynamics at the facility? \boxtimes Yes \square No	
		he review team: Examine the area in the facility where the incident allegedly occurred to whether physical barriers in the area may enable abuse? \boxtimes Yes \square No	
	Does the shifts?	he review team: Assess the adequacy of staffing levels in that area during different $oxtimes$ Yes \oxtimes No	
	■ Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? ✓ Yes ✓ No		
	determ improv	he review team: Prepare a report of its findings, including but not necessarily limited to inations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for ement and submit such report to the facility head and PREA compliance manager? \Box No	
115.86	(e)		
		he facility implement the recommendations for improvement, or document its reasons for ng so? \boxtimes Yes $\ \square$ No	
Audito	r Overa	all Compliance Determination	
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does

not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Following the closing off all investigations an incident review meeting is held within the 30 days. The only time this is not held if the investigation was found to be unfounded. The auditor reviewed the incident reviews to ensure that at all areas are being covered during the review and they were. Any recommendations by the review committee are then reviewed by the commander and the agency director.

Standard 115.87: Data collection
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.87 (a)
■ Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions? ⊠ Yes □ No
115.87 (b)
 ■ Does the agency aggregate the incident-based sexual abuse data at least annually? ☑ Yes □ No
115.87 (c)
■ Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice? ⊠ Yes □ No
115.87 (d)
 Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews? ☑ Yes □ No
115.87 (e)
 Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) □ Yes □ No ⋈ NA
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Auditor Overall Compliance Determination

⋈ Yes □ No □ NA

Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)

		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instruc	ctions f	or Overall Compliance Determination Narrative
complia conclus not me	ance or sions. Ti et the st	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does and and an analysis and reasoning. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
reviewe of inma	ed annu ates into	cted by the incident review and the investigations is kept so that data of incidents can be ally. This is helpful as Maleng Regional Justice Center looks at staffing and placements the living units. The knowledge of where alleged locations of incidents occur is an to use for the jail administrators.
Stand	dard 1	15.88: Data review for corrective action
All Yes	s/No Qu	uestions Must Be Answered by the Auditor to Complete the Report
115.88	(a)	
•	and im	he agency review data collected and aggregated pursuant to § 115.87 in order to assess prove the effectiveness of its sexual abuse prevention, detection, and response policies, es, and training, including by: Identifying problem areas? Yes No
•	and im practic	he agency review data collected and aggregated pursuant to § 115.87 in order to assess prove the effectiveness of its sexual abuse prevention, detection, and response policies, es, and training, including by: Taking corrective action on an ongoing basis? □ No
•	and im practic	he agency review data collected and aggregated pursuant to § 115.87 in order to assess prove the effectiveness of its sexual abuse prevention, detection, and response policies, es, and training, including by: Preparing an annual report of its findings and corrective for each facility, as well as the agency as a whole? \boxtimes Yes \square No
115.88	(b)	
•		he agency's annual report include a comparison of the current year's data and corrective with those from prior years and provide an assessment of the agency's progress in

addressing sexual abuse \boxtimes Yes $\ \square$ No

115.88 (c)
■ Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means? ✓ Yes ✓ No
115.88 (d)
■ Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility? ✓ Yes ✓ No
Auditor Overall Compliance Determination
☐ Exceeds Standard (Substantially exceeds requirement of standards)
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (Requires Corrective Action)
Instructions for Overall Compliance Determination Narrative
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The annual report provided is very detailed and provides useful information for the jail administrators to use as they continue to have the jail be safe and secure. This information is helpful as it relates to potential sexual assault but also in the general security of the jail.
Standard 115.89: Data storage, publication, and destruction
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.89 (a)
 Does the agency ensure that data collected pursuant to § 115.87 are securely retained? ☑ Yes □ No
115.89 (b)

■ Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? ⊠ Yes □ No	
115.89 (c)	
■ Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? ✓ Yes No	
115.89 (d)	
■ Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? ☑ Yes ☐ No	
Auditor Overall Compliance Determination	
Exceeds Standard (Substantially exceeds requirement of standards)	
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
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Instructions for Overall Compliance Determination Narrative	
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The information collected is held and can be reviewed. This is and will be helpful tool as the jail administrators look back on what has been improved and how and why allegations occur.	
AUDITING AND CORRECTIVE ACTION	
Standard 115.401: Frequency and scope of audits	
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report	
115.401 (a)	

 During the three-year period starting on August 20, 2013, and during each three-year period thereafter, did the agency ensure that each facility operated by the agency, or by a private

organization on behalf of the agency, was audited at least once? (N/A before August 20, 2016.) $oxine$ Yes $oxdot$ No $oxdot$ NA			
115.401 (b)			
■ During each one-year period starting on August 20, 2013, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited? ⊠ Yes □ No			
115.401 (h)			
 ■ Did the auditor have access to, and the ability to observe, all areas of the audited facility? ☑ Yes □ No 			
115.401 (i)			
■ Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? Yes □ No			
115.401 (m)			
 Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? ☑ Yes □ No 			
115.401 (n)			
■ Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? ✓ Yes ✓ No			
Auditor Overall Compliance Determination			
Exceeds Standard (Substantially exceeds requirement of standards)			
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)			
□ Does Not Meet Standard (Requires Corrective Action)			
Instructions for Overall Compliance Determination Narrative			

The auditor had access to the entire detention facility. The auditors name and address was still up on bulletin boards announcing the arrival and dates the auditor would be on site. The auditor was provided the audit from 3 years ago, the first PREA audit done of the facility.

Standard 115.403: Audit contents and findings

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.403 (f)

The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.) ⋈ Yes ⋈ NO ⋈ NA

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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The audit completed 3 years ago was made available to the auditor. There were areas that had to be reviewed from 3 years past because during this audit there were standards that were found to be in noncompliance.

AUDITOR CERTIFICATION

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- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission. Auditors are not permitted to submit audit reports that have been scanned. See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

John Barkley	July 15, 2018
-	
Auditor Signature	Date

¹ See additional instructions here: https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110.

² See *PREA Auditor Handbook*, Version 1.0, August 2017; Pages 68-69.